



City of Santa Clara

Inspection Division
1500 Warburton Avenue
Santa Clara, CA 95050
Telephone: (408) 615-2440
Fax: (408) 241-3823

POOL AND ANTI-ENTRAPMENT COVER CERTIFICATION FORM

BLD: _____

Property address: _____ in the City of Santa Clara

I am the ☐ Permit Applicant; ☐ Contractor; or ☐ Owner and certify that:

☐ The property does not have a swimming pool, toddler pool or spa

☐ The property has a: ☐ swimming pool; ☐ toddler pool or ☐ spa

Signature: _____ Date: _____

Please print name: _____

Permit cannot be final until this form is completed, signed and received by the Building Inspection Office.

I hereby certify that an anti-entrapment cover meeting the current standards of the American Society for Testing and Materials or the American Society of Mechanical Engineers is installed at the ☐ swimming pool, ☐ toddler pool, or ☐ spa at _____
Property Address

Signature (Owner or Authorized Agent)

(Date)

(Please print name)

(Phone Number)

Mailing Address